

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> <u>10/01/2003</u>	Date Stamp      Page 1 of 18	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">             CALIFORNIA FORM 497           </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> <u>003</u>			
<b>STREET ADDRESS</b>  			<div style="background-color: black; color: white; padding: 2px;"> <b>Amendment to Report No.</b> <u>002</u> </div> (explain below)		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>No. of Pages</b> <u>18</u>		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Cabazon Band of Mission Indians Indio, CA 92201	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$75,000.00
09/22/2003	Members' Voice of the State Building Trades Sacramento, CA 95814  ID# 980162	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$375.00
09/22/2003	State Building & Construction Trades Council of CA Sacramento, CA 95814  ID# 743501	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$7,794.16

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> <u>10/01/2003</u>  <b>Report No.</b> <u>003</u>  <input checked="" type="checkbox"/> <b>Amendment to Report No.</b> <u>002</u> <small>(explain below)</small>  <b>No. of Pages</b> <u>18</u>	Date Stamp    Page 2 of 18	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">             CALIFORNIA FORM 497           </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416				
<b>STREET ADDRESS</b>  					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035			

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Members' Voice of the State Building Trades Sacramento, CA 95814  ID# 980162	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$220.41
09/22/2003	Jane Epstein Indian Wells, CA 92210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	\$9,000.00
09/22/2003	David Epstein Indian Wells, CA 92210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney David Epstein	\$9,000.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> 10/01/2003	Date Stamp   Page 3 of 18	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> 003			
<b>STREET ADDRESS</b>  					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>Amendment to Report No.</b> 002 (explain below)		
			<b>No. of Pages</b> 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Superspeed Transportation, Inc. Inglewood, CA 90301	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
09/22/2003	Asif Mahmood Arcadia, CA 91007	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Asif Mamood, M.D.	\$2,000.00
09/22/2003	John Chang San Marino, CA 91108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$4,000.00

### \*Contributor Codes

IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> 10/01/2003	Date Stamp   Page 4 of 18	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> 003			
<b>STREET ADDRESS</b>  					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>Amendment to Report No.</b> 002 (explain below)		
			<b>No. of Pages</b> 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Anthony Chen Diamond Bar, CA 91765	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00
09/22/2003	Hing Wa Lee Specialty Stores, Inc. Irvine, CA 92604	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00
09/22/2003	Vincent Chong Monterey Park, CA 91754	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Artfield & Craftsman	\$2,000.00

### \*Contributor Codes

IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> <u>10/01/2003</u>	Date Stamp       Page 5 of 18	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">             CALIFORNIA FORM 497           </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> <u>003</u>			
<b>STREET ADDRESS</b>  			<div style="background-color: black; color: white; padding: 2px;"> <input checked="" type="checkbox"/> <b>Amendment to Report No.</b> <u>002</u> </div> (explain below)		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>No. of Pages</b> <u>18</u>		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Felix Chi-Ming Yip Monterey Park, CA 91754	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Felix Chi-Ming Yip	\$2,000.00
09/22/2003	Kenneth T. Sim Monterey Park, CA 91754	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Kenneth Sim	\$2,000.00
09/22/2003	Matthews & Rager, LLP Pasadena, CA 91101	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> 10/01/2003	Date Stamp   Page 6 of 18	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> 003			
<b>STREET ADDRESS</b>					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<input checked="" type="checkbox"/> <b>Amendment to Report No.</b> 002 (explain below)		
			<b>No. of Pages</b> 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Raymond Cheng Pasadena, CA 91101	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00
09/22/2003	Eric Gho Diamond Bar, CA 91765	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$9,500.00
09/22/2003	Goldrich & Kest Industries Culver City, CA 90230	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$50,000.00

### \*Contributor Codes

IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> <u>10/01/2003</u>	Date Stamp       Page 7 of 18	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">             CALIFORNIA FORM 497           </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> <u>003</u>			
<b>STREET ADDRESS</b>  			<div style="background-color: black; color: white; padding: 2px;"> <b>Amendment to Report No.</b> <u>002</u> </div> (explain below)		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>No. of Pages</b> <u>18</u>		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Twenty-Nine Palms Band of Mission Indians Coachella, CA 92236	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,000.00
09/22/2003	Allen I. Mindlin Sherman Oaks, CA 91403	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	\$1,000.00
09/22/2003	Kuehl for Senate Beverly Hills, CA 90211  ID# 990271	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> <u>10/01/2003</u>	Date Stamp       Page 8 of 18	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">             CALIFORNIA FORM 497           </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> <u>003</u>			
<b>STREET ADDRESS</b>  			<div style="background-color: black; color: white; padding: 2px;"> <input checked="" type="checkbox"/> <b>Amendment to Report No.</b> <u>002</u> </div> (explain below)		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>No. of Pages</b> <u>18</u>		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Women's Political Committee (State Account) Los Angeles, CA 90017  ID# 770995	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
09/22/2003	Judith Hopkinson Santa Barbara, CA 93110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	\$15,000.00
09/22/2003	John Almquist Felton, CA 95018	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Supervisor County of Santa Cruz	\$1,500.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.



# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> _____ 10/01/2003	Date Stamp      Page 9 of 18	<div style="background-color: black; color: white; padding: 5px; display: inline-block;"> <b>CALIFORNIA FORM 497</b> </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> _____ 003			
<b>STREET ADDRESS</b>  			<div style="background-color: black; color: white; padding: 2px; display: inline-block;"> <b>Amendment to Report No.</b> </div> _____ 002 <small>(explain below)</small>		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>No. of Pages</b> _____ 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Faculty for Our University's Future, Local Comm. Los Angeles, CA 90045  ID# 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$125.00
09/22/2003	Faculty for Our University's Future, Local Comm. Los Angeles, CA 90045  ID# 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$349.97
09/22/2003	Faculty for Our University's Future, Local Comm. Los Angeles, CA 90045  ID# 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$123.75

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> _____ 10/01/2003	Date Stamp       Page 10 of 18	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> _____ 003			
<b>STREET ADDRESS</b>  					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>Amendment to Report No.</b> _____ 002 <small>(explain below)</small>		
			<b>No. of Pages</b> _____ 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Faculty for Our University's Future, Local Comm. Los Angeles, CA 90045  ID# 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$216.00
09/22/2003	Faculty for Our University's Future, Local Comm. Los Angeles, CA 90045  ID# 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$34.38
09/22/2003	Faculty for Our University's Future, Local Comm. Los Angeles, CA 90045  ID# 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$199.20

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> _____ 10/01/2003	Date Stamp      Page 11 of 18	<div style="background-color: black; color: white; padding: 5px; display: inline-block;"> <b>CALIFORNIA FORM 497</b> </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> _____ 003			
<b>STREET ADDRESS</b>  					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>Amendment to Report No.</b> _____ 002 <small>(explain below)</small>		
			<b>No. of Pages</b> _____ 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Faculty for Our University's Future, Local Comm. Los Angeles, CA 90045  ID# 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00
09/22/2003	Faculty for Our University's Future, Local Comm. Los Angeles, CA 90045  ID# 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100.00
09/22/2003	Operating Engineers Local #3 Statewide PAC Alameda, CA 94502  ID# 981697	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,000.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> 10/01/2003	Date Stamp   Page 12 of 18	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> 003			
<b>STREET ADDRESS</b>  					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>Amendment to Report No.</b> 002 (explain below)		
			<b>No. of Pages</b> 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	CA. Recreation Vehicle Dealers Ass'n PAC Sacramento, CA 95814  ID# 1241239	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00
09/22/2003	Law Offices of Remy, Thomas and Manley, LLP Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00
09/22/2003	Mark Lindquist Oakland, CA 94619	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner M.A. Lindquist Co., Inc.	\$1,000.00

### \*Contributor Codes

IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> 10/01/2003	Date Stamp   Page 13 of 18	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> 003			
<b>STREET ADDRESS</b>					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>Amendment to Report No.</b> 002 (explain below)		
			<b>No. of Pages</b> 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	West Bay Leasing, Inc. Brisbane, CA 94005	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00
09/22/2003	UCPCM / PAC Alameda, CA 94501  ID# 970546	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
09/22/2003	Viken Keuylian Laguna Hills, CA 92653	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00

### \*Contributor Codes

IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> _____ 10/01/2003	Date Stamp       Page 14 of 18	<div style="background-color: black; color: white; padding: 5px; display: inline-block;"> <b>CALIFORNIA FORM 497</b> </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> _____ 003			
<b>STREET ADDRESS</b>   					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>Amendment to Report No.</b> _____ 002 (explain below)		
			<b>No. of Pages</b> _____ 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	William Breall San Francisco, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician William S. Breall	\$3,000.00
09/22/2003	William Breall San Francisco, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician William S. Breall	\$7,000.00
09/22/2003	Acacia Pacific Holdings, Inc. San Francisco, CA 94102	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> 10/01/2003	Date Stamp   Page 15 of 18	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> 003			
<b>STREET ADDRESS</b>  					
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>Amendment to Report No.</b> 002 (explain below)		
			<b>No. of Pages</b> 18		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	Raymond Levy San Francisco, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Raymond H. Levy	\$20,000.00
09/22/2003	Law Offices of Christopher H. Whelan, Inc. Gold River, CA 95670	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00
09/22/2003	Paul & Janofsky Santa Monica, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00

### \*Contributor Codes

IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> <u>10/01/2003</u>	Date Stamp       Page 16 of 18	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">             CALIFORNIA FORM 497           </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> <u>003</u>			
<b>STREET ADDRESS</b>  			<div style="background-color: black; color: white; padding: 2px;"> <input checked="" type="checkbox"/> <b>Amendment to Report No.</b> <u>002</u> </div> (explain below)		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>No. of Pages</b> <u>18</u>		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	William Levin San Francisco, CA 94104	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Levin, Simes & Kaiser, LLP	\$1,000.00
09/22/2003	Phyllis Epstein La Jolla, CA 92037	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	\$1,000.00
09/22/2003	Nancy Fraser Los Angeles, CA 90049	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Med Legal Consultant Source	\$6,000.00

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.



# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> <u>10/01/2003</u>	Date Stamp      Page 17 of 18	<div style="background-color: black; color: white; padding: 5px; display: inline-block;"> <b>CALIFORNIA FORM 497</b> </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344	<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> <u>003</u>			
<b>STREET ADDRESS</b>  			<div style="background-color: black; color: white; padding: 2px;"> <b>Amendment to Report No.</b> <u>002</u> </div> (explain below)		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>No. of Pages</b> <u>18</u>		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/22/2003	James Carr Los Angeles, CA 90025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Law Offices of James P. Carr	\$1,000.00
09/22/2003	Contra Costa Central Labor Council Martinez, CA 94553	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$3,659.39
09/22/2003	Members' Voice of the State Building Trades Sacramento, CA 95814  ID# 980162	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$7,794.16

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

Contribution information corrected.

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Californians Against the Costly Recall of the Governor: Coalition of Firefighters, Workers, Educators, Bus, Bus Leaders, CA Dem Party, Entertainment Bus, Dem Governors, Governor Gray Davis Committee			<b>Date of This Filing</b> 10/01/2003	Date Stamp   Page 18 of 18	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310)201-0344		<b>I.D. NUMBER</b> (if applicable) 1256416	<b>Report No.</b> 003		
<b>STREET ADDRESS</b>			<input checked="" type="checkbox"/> <b>Amendment to Report No.</b> 002 (explain below)		
<b>CITY</b> Los Angeles		<b>STATE</b> CA	<b>ZIP CODE</b> 90035	<b>No. of Pages</b> 18	

## Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment:  
Contribution information corrected.